

## Short communication

## Auricular wedge excision made easy

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*Dear Sir,*

Disruption in the helical rim can result from trauma or oncological resections.<sup>1</sup> Almost half of ear tumours involve the helical rim.<sup>2</sup> Numerous techniques have been described in the past to reconstruct defects arising in this area.

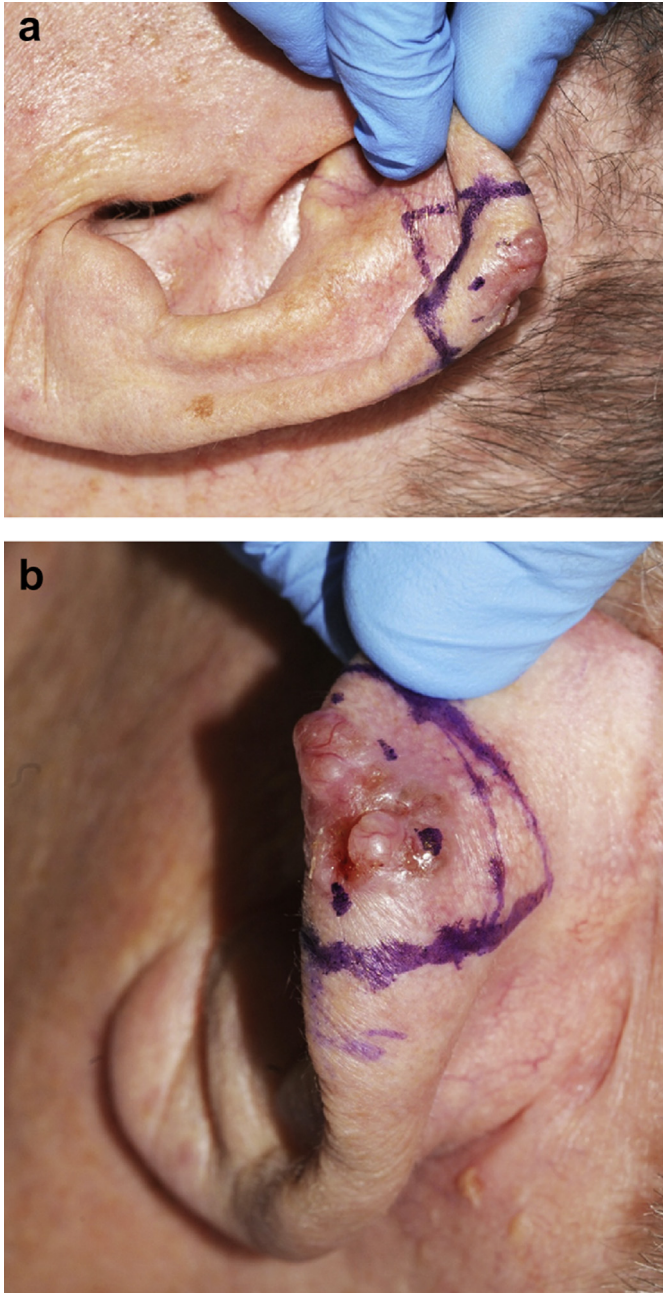
Wedge-shaped full thickness excision is considered a simple, easy and effective method of reconstruction in some cases.<sup>3</sup> This is commonly used in small defects (<1.5 cm) of the helix and antihelix.<sup>4</sup> We describe a simple, quick and neat technique to perform auricular wedge excision. We used this technique in 42 skin lesions located at the helical rim.

The lesion is marked with the appropriate margins under loupe magnification. The superior and inferior margins are extended medially until they meet on both the anterior and posterior aspects of the ear. This forms an isosceles triangle with its base at the helical rim (Figure 1a and b).

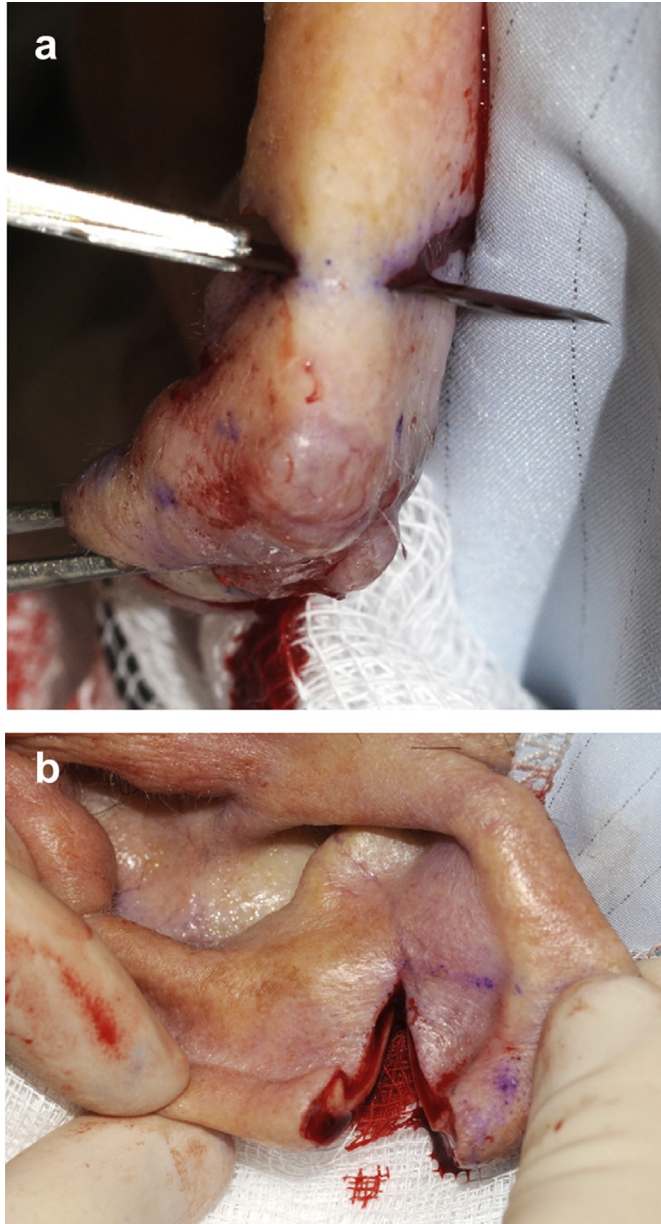
We use a number 11 blade to penetrate and cut along the markings from anterior to posterior and medial to lateral through all layers (Figure 2a).

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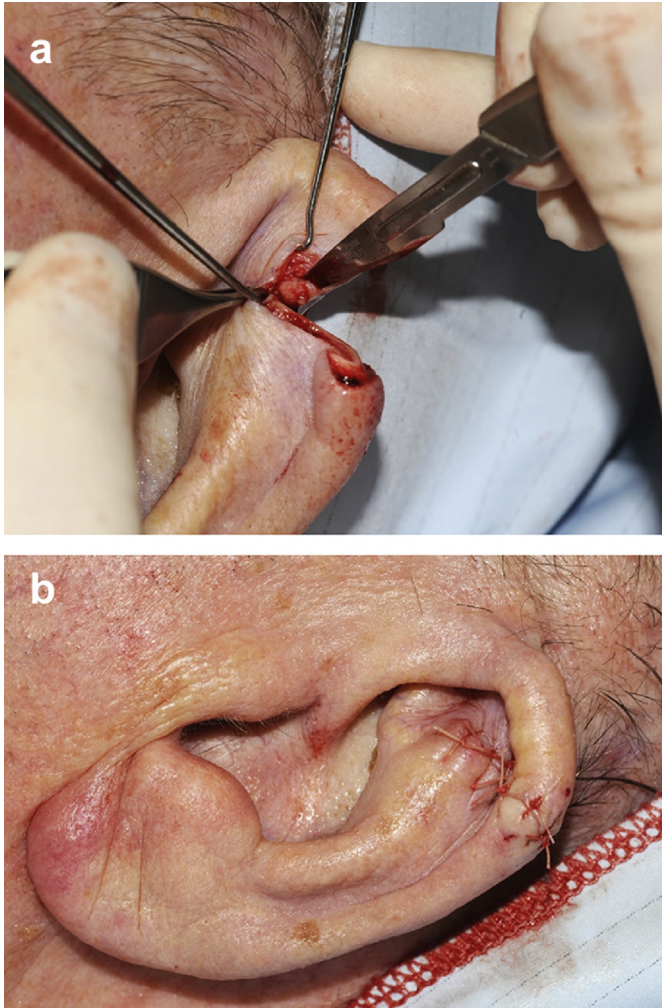
**Figure 1.** Nodular BCC to helical rim marked with appropriate margins: a. anterior aspect b. Posterior aspect.



**Figure 2.** a. Demonstration of eleven blade's penetrating and cutting action resulting in b. Simultaneous anterior to posterior symmetrical resection.

At the wedge tip a 2–3 mm circle of cartilage without skin is excised to prevent dog-ear formation. This is essential when the wedge tip is greater than  $30^\circ$  (Figure 3a). Wedge edges are approximated in layers using absorbable sutures (Figure 3b).

The use of number 11 blade instead of the 15 blade, more commonly used in plastic surgery procedures, added more simplicity and accuracy to the excision margins. The combination of the penetrating and cutting action of the 11 blade has improved the quality of the cut margins. In addition, the



**Figure 3.** a. A 2–3 mm circle of cartilage without skin is excised from the wedge tip to prevent dog-ear formation b. Wedge edges are approximated in layers.

advantage of the simultaneous anterior to posterior symmetrical resection is reflected in the neat cut edges and aided closure ([Figure 2b](#)). This prevents under or overcutting the posterior wall layers as may happen whilst using the 15 blade.

The use of the 11 blade in our experience had made auricular wedge resection quick and easy. It also produced a reliable aesthetic outcome even in the hand of less experienced surgeons ([Figure 3b](#)).

#### **Conflict of interest**

None.

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None.

## References

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